

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECT

	Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bus		me. ≦ ¥		
	Please type or print legibly.				
	NOTE: See instructions on reverse before	filing.			
		V- 440-04			
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	The assumed pusitiess tiditie which the didensighed use(s) it the transaction of				
D	The Handy Mac Home Maintenance				
	The Handy I lac Home	- Mai	ntenance	•	
•		_ · 			
2. 7	. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing				
	business under the assumed business name:				
*	Name		Complete Address		
,		~	$\sim \Delta$ 110	11/	
	atrick K. Mukerholds	5′	501 N. SUMMERCREST	War	
	Melanie D. Ma Relinolds	Mx	oridian ID 836	43	
			, , , , , , , , , , , , , , , , , , , ,		
3. T	he peneral type of hypinose transpoted unde	ar tha as	sourmed business name is:		
J. 1	The general type of business transacted under the assumed business name is:				
	Retail Trade Transportation and Public Utilities				
	☐ Wholesale Trade ☐ Construction	,			
	Services Agriculture	- 1	Submit Certificate of		
	☐ Manufacturing ☐ Mining	ľ	Assumed Business		
			Name and \$25.00 fee to:		
	Finance, Insurance, and Real Estate	l	FAX 208 334 2080		
4.1	he name and address to which future		Secretary of State		
	orrespondence should be addressed:	ŀ	700 West Jefferson		
V	onespondence should be addressed.	4	Basement West		
	The Handillac	1	PO Box 83720		
		. [Boise ID 83720-0080		
	3501 N/ Summer crest Way	ı	208 334-2301		
	Meridian 10 85642	L			
5 .	Name and address for this acknowledgment		Phone number (optional):		
	CODY IS (if other than # 4 above):		(20e)887-5403		
	• •		(200,801) [0]		
	_		Secretary of State use only		
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rintad	Name: Hatrick K. MEREYNOUS	A P	T =		
iii ileu	Traine, IV (V . C. C. T.	£ 3	1)@7141		

Si Capacity/Title: OWNer

(see instruction # 8 on back of form)

IDANO SECRETARY OF STATE
11/23/2004 05:00
CK: 3837 CT: 158818 BH: 778135
1 8 25.88 = 25.88 ASSUM NAME # 2